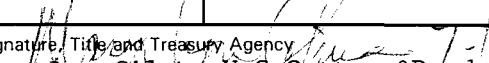




Department of the Treasury
Federal Law Enforcement Agencies
PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER CR- 04-10345-NMG	
DEFENDANT MOHAMMED ABDUL AZIZ QURAISHI		TYPE OF PROCESS FINAL ORDER OF FORFEITURE	
SERVE AT	Name Of Individual, Company, Corporation, Etc. to Serve or Description of Property to Seize Mohammed Abdul Rasheed Quraishi		
	Address (Street or RFD / Apt. # / City, State, and Zip Code) 1681 Bloomingdale Road, Glendale Heights, IL 60139		
Send NOTICE OF SERVICE copy to Requester: Kristina E. Barclay, Assistant U.S. Attorney United States Attorney's Office One Courthouse Way Boston, MA 02210		Number Of Process To Be Served In This Case.	
		Number Of Parties To Be Served In This Case.	
		Check Box If Service Is On USA	
SPECIAL INSTRUCTIONS or OTHER INFORMATION TO ASSIST IN EXPEDITING SERVICE (includes Business and Alternate Addresses, Phone Numbers, and Estimated Availability times.) Please serve notice of a copy of the attached Final Order of Forfeiture to the above named individual by certified mail, return receipt requested. DM x3673			
Signature of Attorney or other Originator requesting service on behalf of <input checked="" type="checkbox"/> Plaintiff		Telephone No.	Date
 SIGNATURE OF PERSON ACCEPTING PROCESS:		Date	
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY			
I acknowledge receipt for the Total # of Process Indicated.	District of Origin No. _____	District to Serve No. _____	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER:
I hereby Certify and Return That I <input type="checkbox"/> PERSONALLY SERVED, <input type="checkbox"/> HAVE LEGAL EVIDENCE OF SERVICE, <input checked="" type="checkbox"/> HAVE EXECUTED AS SHOWN IN "REMARKS", the Process Described on the Individual, Company, Corporation, Etc., At The Address Shown Above or at the Address Inserted Below.			
<input type="checkbox"/> I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC. NAMED ABOVE.			
NAME & TITLE of Individual Served If not shown above:		<input type="checkbox"/> A Person of suitable age and discretion then residing in the defendant's usual place of abode.	
ADDRESS: (Complete only if different than shown above.)		Date of Service	Time of Service <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM PLEASE SEE REMARKS SECTION BELOW
Signature, Title and Treasury Agency  Mary Lou Gilman U.S. Customs & Border Protection			
REMARKS: <p style="margin-left: 40px;">The above described Order was sent by certified mail #7001 2510 0003 4299 on October 11, 2006. Returned unclaimed on 11-08-2006. Sent via regular mail on 3-30-2007. Copy of certified mailing attached.</p>			

TD F 90-22.48 (6/96)


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Search Results

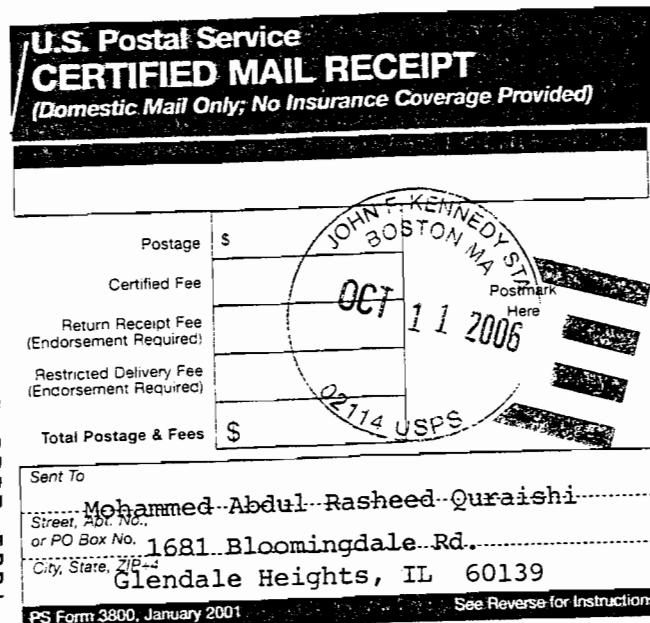
Label/Receipt Number: 7001 2510 0003 4299 5129

Status: Unclaimed

Your item was returned to the sender on November 01, 2006 because it was not claimed by the addressee.

[Additional Details >](#)
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Enter Label/Receipt Number.



is for your item sent to you or others by email.

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NOV 02 2006

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mohammed Abdul Rasheed Quraishi
1681 Bloomingdale Rd.
Glendale Heights, IL 60139

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Thomas Rector

Agent
 Address

B. Received by (Printed Name)

Thomas Rector

C. Date of Deliv.

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) Yes



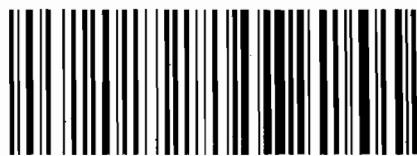
**U.S. Customs and
Border Protection**

10 CAUSEWAY STREET, ROOM 623
BOSTON, MA 02222

OFFICIAL BUSINESS
PENALTY FOR PRIVATE USE \$300

RETURN RECEIPT REQUESTED

CERTIFIED MAIL



7001 2510 0003 4299 5129

UNCLAIMED

Mohammed Abdul Rasheed Quraishi
1681 Bloomingdale Rd.
Glendale Heights, IL [REDACTED]

2006 NO-8 PM-2-37

FPCF-BOS/ON
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BOSTON



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\$04.880
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OFFICE OF THE
FEDERAL DEFENDER
FOR PAGE

Mohammed Abdul Rashed Quraishi
1681 Bloomingdale Road
Glendale Heights, IL 60139